

United States Bankruptcy Court District of IDAHO • Sub-district of POCATELLO		PROOF OF CLAIM <small>THIS SPACE IS FOR COURT USE ONLY</small>												
Name of Debtor(s): <div style="text-align: center;">JOHN L MERZLOCK</div>	Case Number: <div style="text-align: center;">03-41775</div>	<div style="font-size: 1.2em;">03 SEP 12 PM 1:55</div> <div style="font-size: 0.8em;">RECEIVED CAMELION S. BURKE CLERK IDAHO</div>												
	Chapter: <div style="text-align: center;">13</div>													
	Trustee: <div style="text-align: center;">L D FITZGERALD</div>													
<small>NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to U.S.C. § 503</small>														
Name of Creditor (The person or other entity to whom the debtor owes money or property): <div style="text-align: center;">Idaho State Tax Commission</div>	<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if the address differs from the address on the envelope.													
Name and address where notices should be sent: <div style="text-align: center;">Idaho State Tax Commission Bankruptcy Unit P.O. Box 36 Boise, ID 83722</div>														
Account or other number by which identifies debtor: <div style="text-align: center;">SEE ATTACHMENT</div>		Check below if this claim: <input type="checkbox"/> Replaces a previously filed claim dated: <input type="checkbox"/> Amends a previously filed claim dated:												
1. Basis for Claim <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input checked="" type="checkbox"/> Taxes <input type="checkbox"/> Other </div> <div style="width: 45%;"> <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114 <input type="checkbox"/> Wages, Salaries and compensation (fill out below) Your SS #: _____ Unpaid compensation for services performed from _____ to _____ <div style="text-align: center;">(date) (date)</div> </div> </div>														
<div style="border: 1px solid black; padding: 5px; display: inline-block;">UNLIQUIDATED LIABILITIES</div>														
2. Date debt was incurred: <div style="text-align: center;">SEE ATTACHMENT</div>		3. If court Judgment, date obtained:												
4. Secured Claim <input type="checkbox"/> Check box if your claim is secured by collateral (including a right of setoff) Brief Description of Collateral: See below Value of Collateral: _____ Amount of arrearage and other charges at time the case was filed included in secured claim, if any: _____		5. Unsecured Priority Claim <input checked="" type="checkbox"/> Check box if you have an unsecured priority claim Amount entitled to priority: <div style="text-align: right;">\$1,629.25</div> Specify Priority Of Claim: <input type="checkbox"/> Wages, Salaries, or commissions (up to \$4650)* earned within 90 days before filing of the bankruptcy petition or cessation or the debtor's business, whichever is earlier. (11 U.S.C. § 507 (a)(3)) <input type="checkbox"/> Contributions to an employee benefit plan (11 U.S.C. § 507 (a)(4)) <input type="checkbox"/> Up to \$2100* of deposits toward purchase, lease, or rental of property or services for personal, family or household use (11 U.S.C. § 507 (a)(6)) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse or child (11 U.S.C. § 507 (a)(7)) <input checked="" type="checkbox"/> Taxes or penalties owed to governmental units (11 U.S.C. § 507 (a)(8)) <input type="checkbox"/> Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)()												
6. Total Amount of Claim at Time Case was Filed <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">SECURED</td> <td style="width: 30%; text-align: right;">\$0.00</td> <td style="width: 40%;"></td> </tr> <tr> <td>UNSECURED PRIORITY</td> <td style="text-align: right;">\$1,629.25</td> <td></td> </tr> <tr> <td>UNSECURED GENERAL</td> <td style="text-align: right;">\$1,275.40</td> <td></td> </tr> <tr> <td>TOTAL</td> <td style="text-align: right;">\$2,904.65</td> <td></td> </tr> </table>		SECURED	\$0.00		UNSECURED PRIORITY	\$1,629.25		UNSECURED GENERAL	\$1,275.40		TOTAL	\$2,904.65		<small>* Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</small>
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UNSECURED PRIORITY	\$1,629.25													
UNSECURED GENERAL	\$1,275.40													
TOTAL	\$2,904.65													
7. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. 8. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, please explain. If the documents are voluminous, attach a summary. 9. Date Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.		<small>THIS SPACE IS FOR COURT USE ONLY</small> <div style="font-size: 4em; text-align: center;">2</div>												
Date <div style="text-align: center;">09/10/2003</div>	Sign and print the name and title, if any of the creditor or other person authorized to file this claim <div style="text-align: center;"> Kris Fosness Bankruptcy Unit Tel. (208) 334-7778 </div>													
Penalty for presenting fraudulent claim: Fine up to \$500,000 or imprisonment for up to 5 year, or both. 18 U.S.C. § 152 and § 3571														